



# **State and National Overview**

## **Maryland Annual STI Update Meeting**

### **May 26, 2011**

**Maryland Department of Health and Mental Hygiene**  
**Infectious Disease and Environmental Health Administration**

**Barbara Conrad BSN, MPH**

Chief, Center for STI Prevention

Office of Infectious Disease Prevention and Care Services



# MISSION

- To improve the health of Marylanders by reducing the transmission of infectious diseases, helping impacted persons live longer, healthier lives, and protecting individuals and communities from environmental health hazards
- We work in partnership with local health departments, providers, community based organizations, and public and private sector agencies to provide public health leadership in the prevention, control, monitoring, and treatment of infectious diseases and environmental health hazards.



# What The STI Update Will Cover Today

- State and national updates
- Adolescent Sexual Health Education
- Impacts of Pelvic Inflammatory Disease
- Working with Sexual Minority Youth
- STI/HIV Partner Services: statewide and Baltimore County
- CDC's 2010 STD Treatment Guideline Highlights
- "Let's Talk about Sex" video



# What I'll Cover Today

- Maryland STI trends 2009-2010
- Local health department programs and clinic capacity
- National developments
- Next steps in Maryland



# **STI Trends in MD**

## **2009 - 2010**



# Maryland National Rankings for Sexually Transmitted Infections

	2009*			2010**
	MD Ranking	MD Rate	U.S. Rate	MD Rate
Syphilis (primary & secondary)	<b>12<sup>th</sup></b>	5.6 (314 cases)	4.6	5.7 (328 cases)
Congenital Syphilis	<b>1<sup>st</sup></b>	40.0 (31 cases)	10.0	28.5 (22 cases)
Gonorrhea	<b>16<sup>th</sup></b>	113.5 (6,395 cases)	99.1	128.4 (7,413 cases)
Chlamydia	<b>17<sup>th</sup></b>	421.5 (23,747 cases)	409.2	453.7 (26,192 cases)

Syphilis, gonorrhea, and chlamydia rates are cases per 100,000

Congenital syphilis rate is cases per 100,000 live births

\*Source: Centers for Disease Control and Prevention

\*\*Source: DHMH Center for STI Prevention

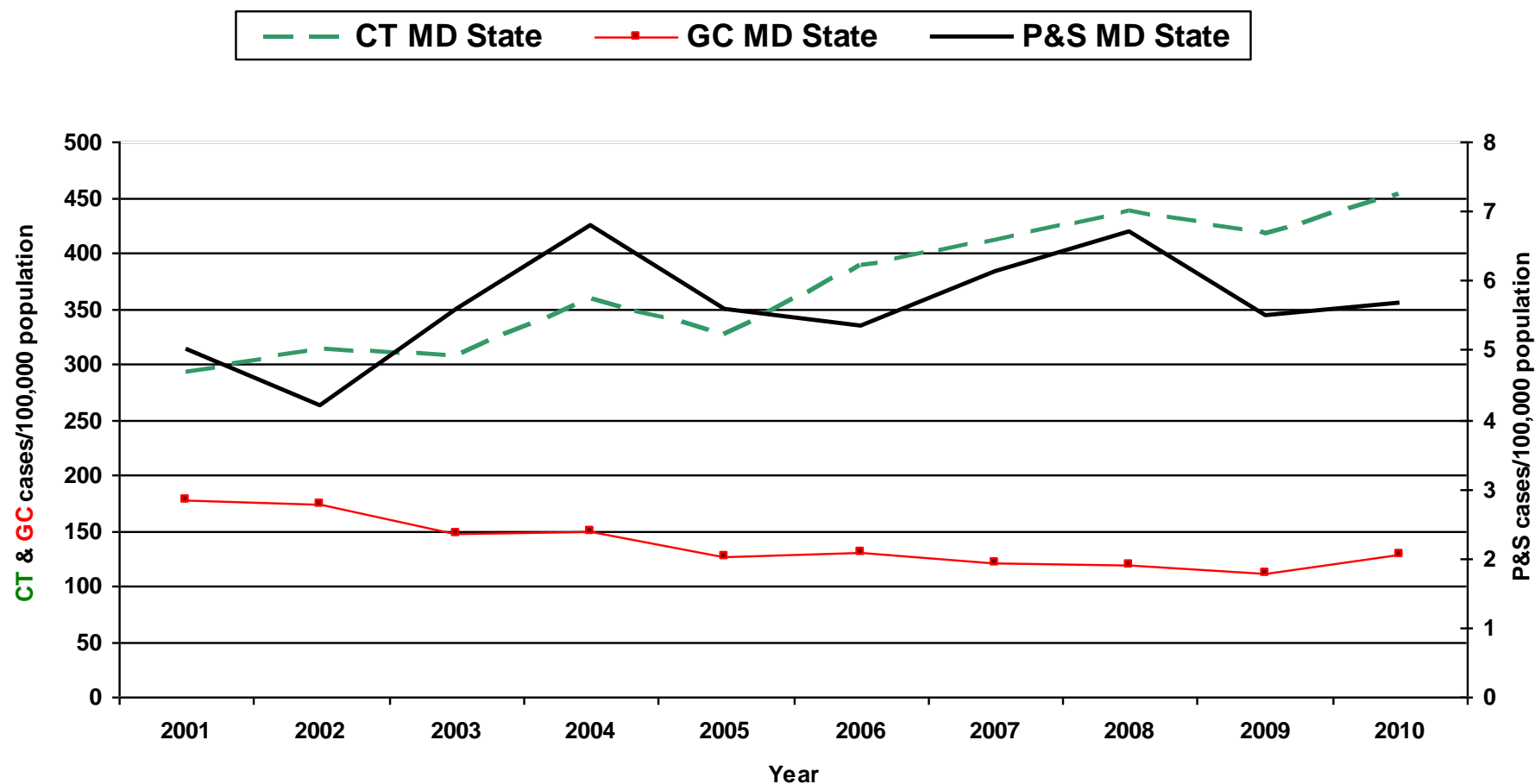
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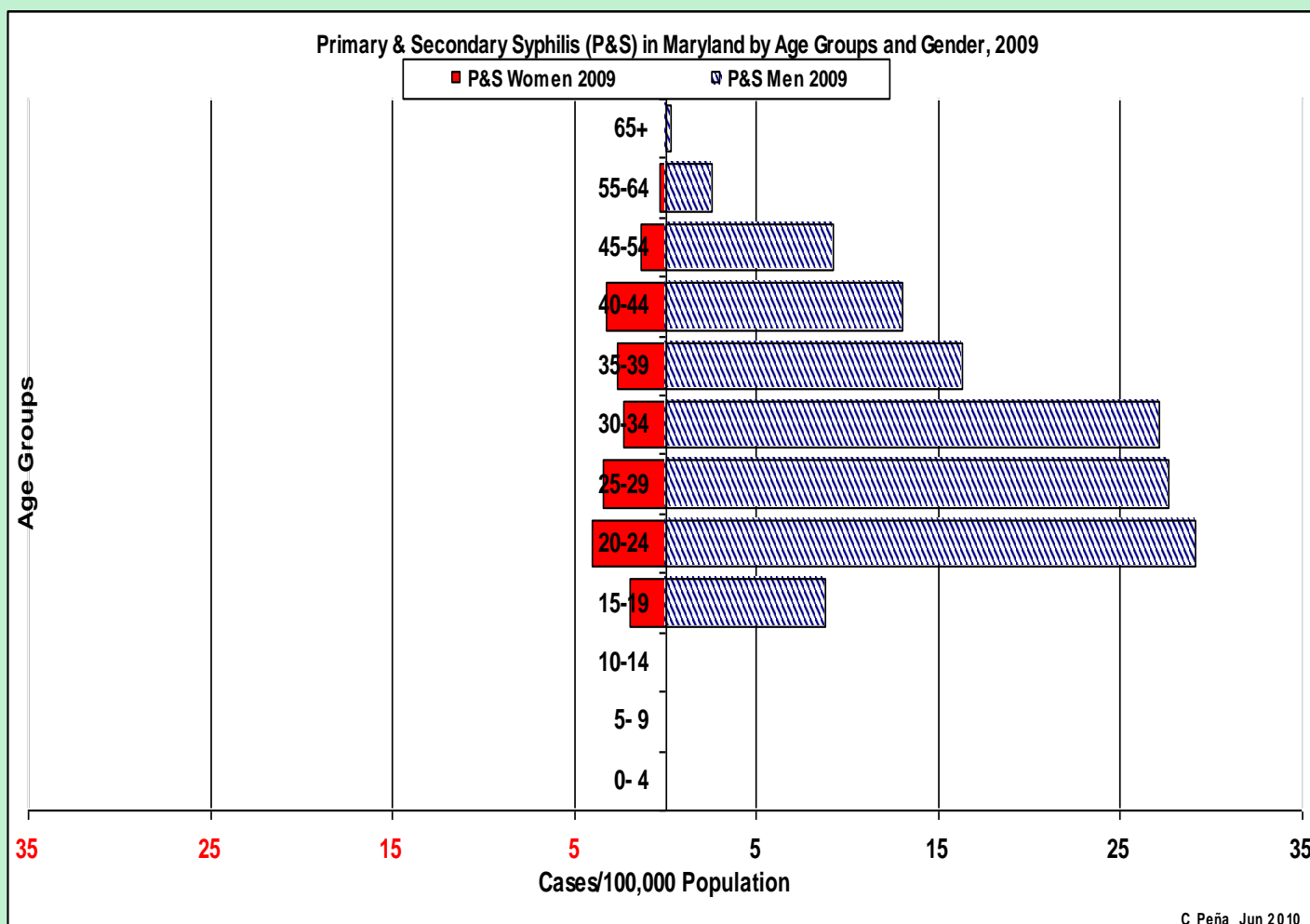
# STI Rate Trends

Incidence Rates of STIs in Maryland, 2001-2010





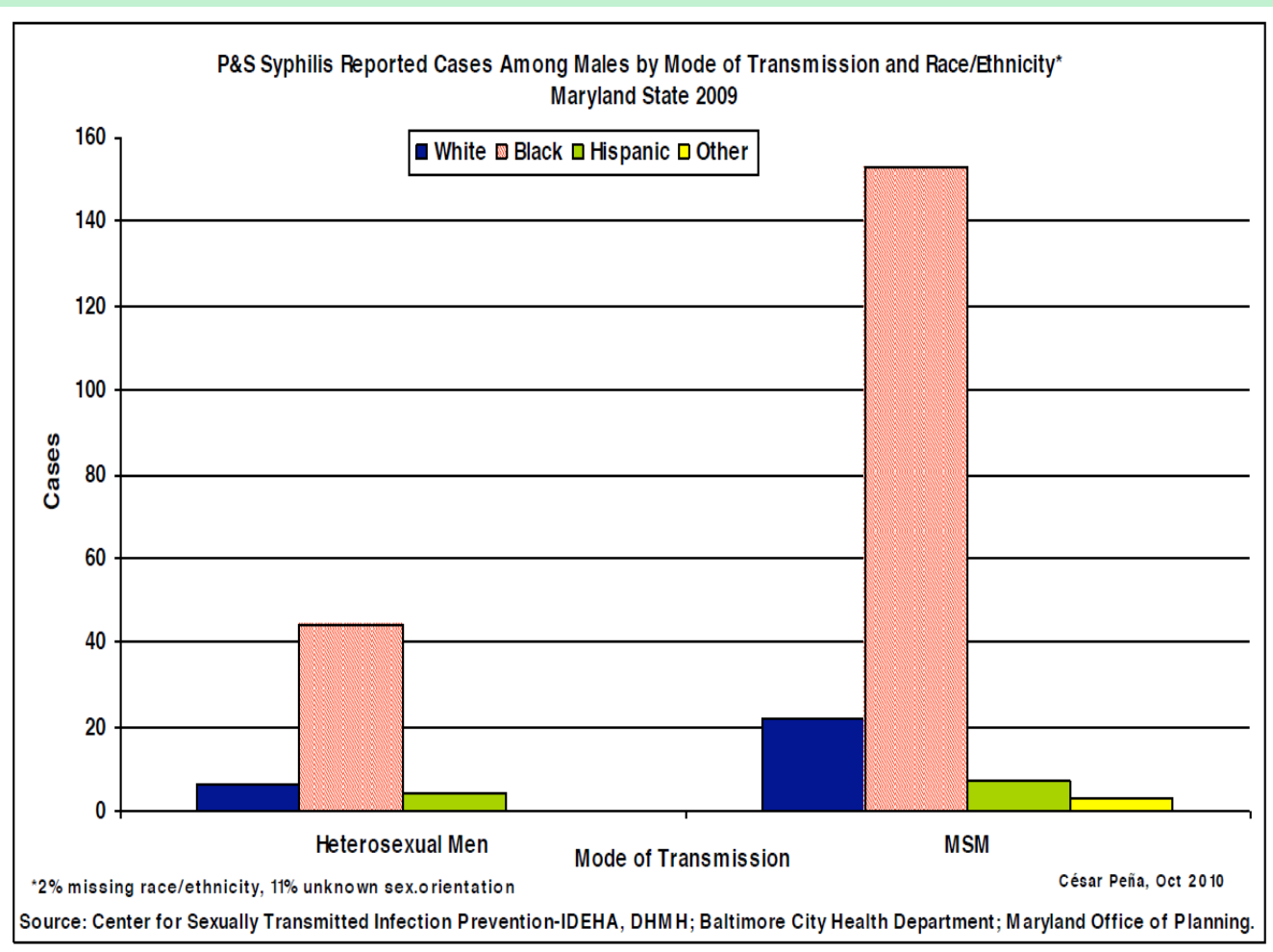
# Rates of P&S Syphilis are Higher in Males







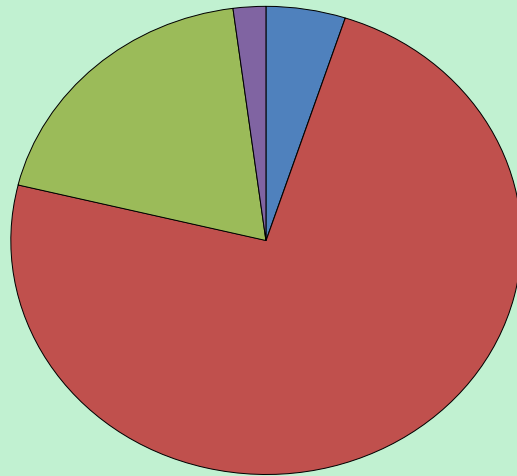
# African American MSM and Syphilis



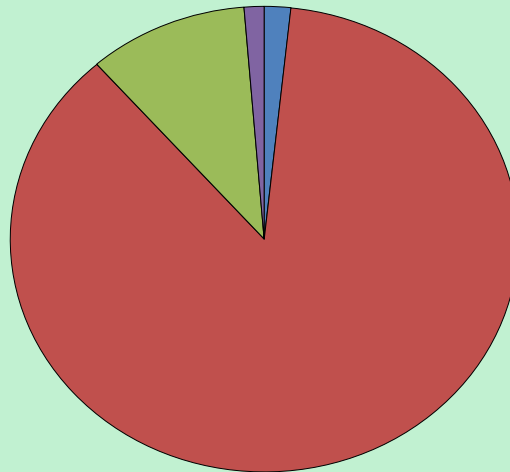


# Disproportionate Impact of STIs by Race/Ethnicity (2009)

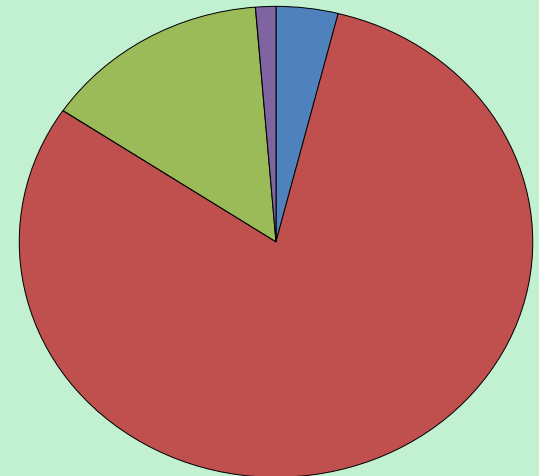
Chlamydia



Gonorrhea



Primary & Secondary Syphilis



■ Hispanic (all races)

■ Non -Hispanic Black

■ Non -Hispanic White

■ Non -Hispanic Other

\*Race/ethnicity was not reported for 34% of chlamydia cases, 25% of gonorrhea cases, and 2% of primary and secondary syphilis cases

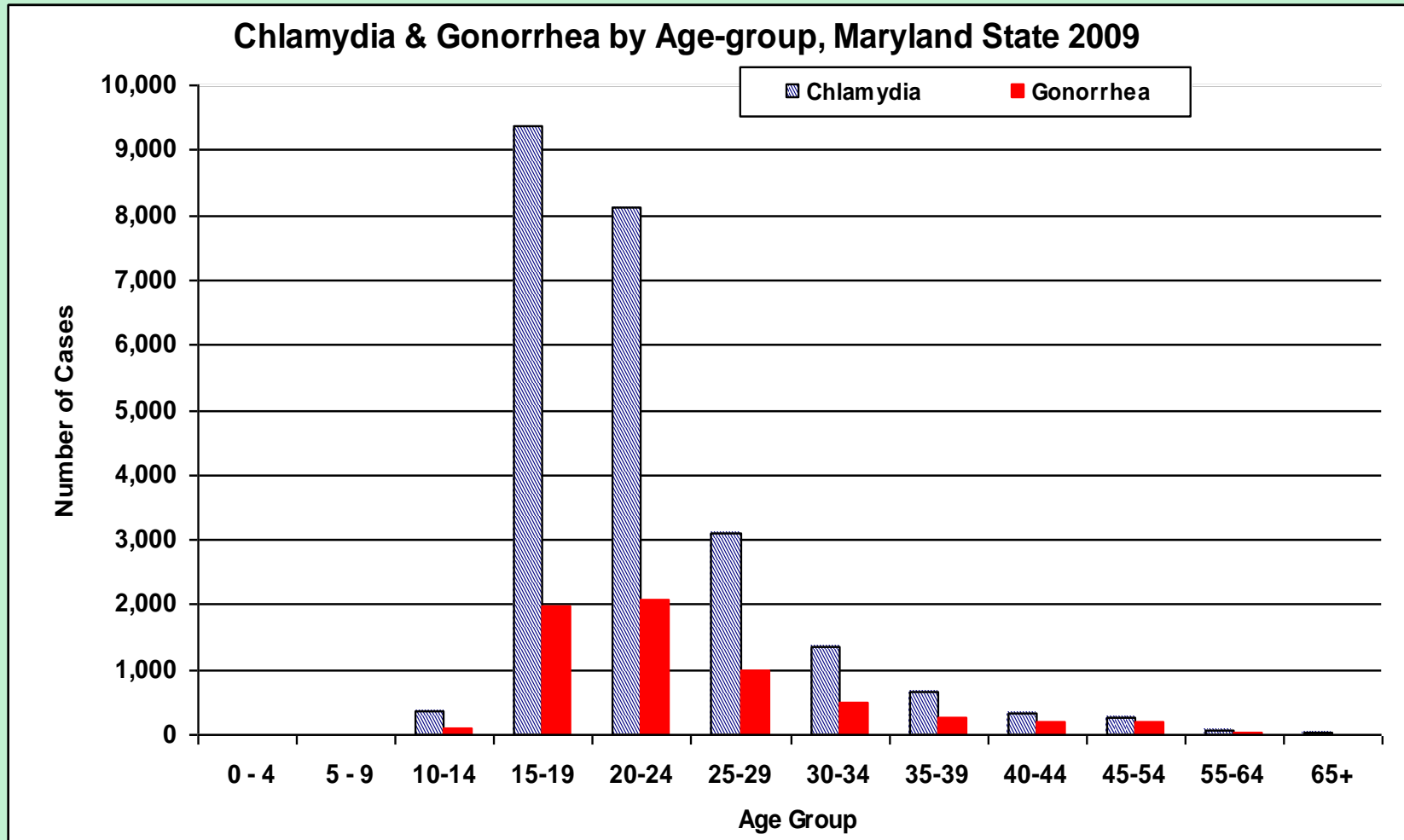


# Gonorrhea Concerns

- **Antibiotic resistance**
- **Recent increase** in many counties
- **Rectal and pharyngeal sites** undertested (GC cultures available)
- **Provider alert:** dual treatment
- **Webinar 4/2010** will be updated
- **Grand Rounds**
- **DIS interviews in STD\*MIS**

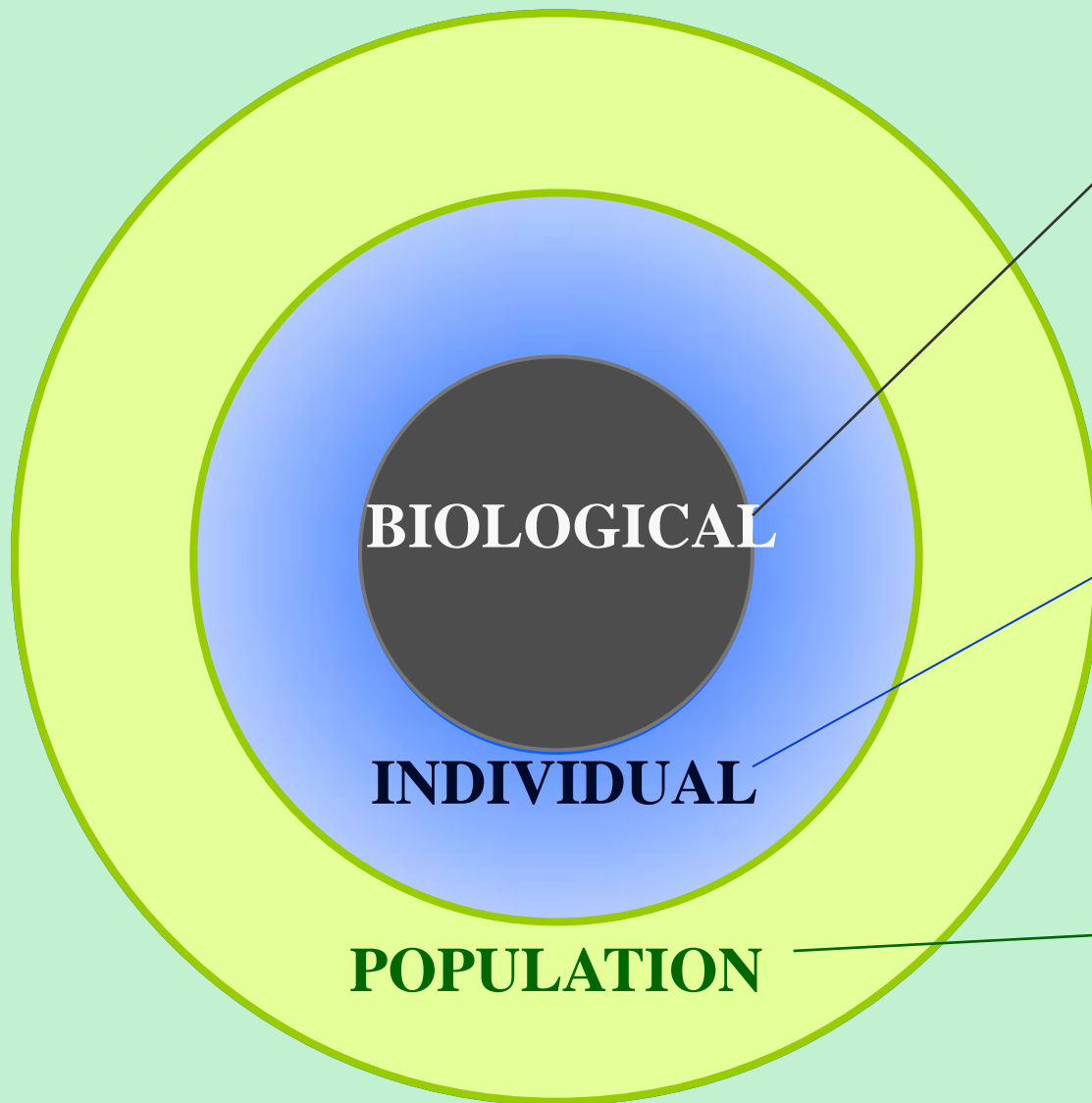


# Youth in Maryland are Most Affected by Chlamydia





# STIs and HIV are Interrelated on Multiple Levels



## STIs increase HIV infectivity:

- ↑ Transmission – STIs increase viral load
- ↑ Acquisition – STIs cause breaks in mucous membranes and bring WBC (i.e., CD4) to site of infection

## Overlapping risk behaviors:

- Inconsistent condom use
- Multiple sex partners

## Increased exposure to STIs/HIV due to:

- Sexual networks
- Social factors (e.g., poverty)

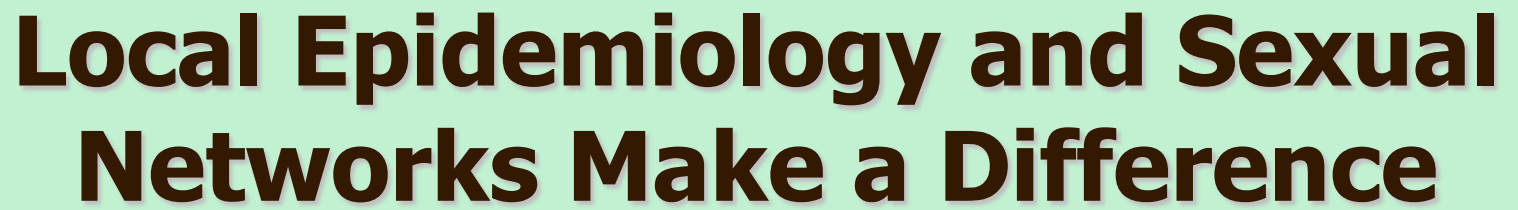


# HIV Risk for Teens who had STI (Philadelphia)

- Adolescents diagnosed with a STI during school-based screenings are **2.5-3.0 times more likely** to be diagnosed with HIV in the future
- Adolescents diagnosed with 3 or more STIs are **4.0-6.0 times more likely** to be diagnosed with HIV in the future

[http://articles.philly.com/2011-04-07/news/29392841\\_1\\_hiv-risk-new-hiv-cases-hiv-or-aids](http://articles.philly.com/2011-04-07/news/29392841_1_hiv-risk-new-hiv-cases-hiv-or-aids)





The map displays the following congressional districts and their corresponding counties:

- 21st District (Dark Red):** Allegany, Garrett, Washington, St. Mary's, Prince George's, Anne Arundel, and Howard counties.
- 20th District (Orange):** Frederick, Carroll, and Harford counties.
- 19th District (Light Tan):** Cecil, Kent, and Dorchester counties.

Other counties shown include:
 

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- 20th District (Orange):** Frederick, Carroll, and Harford counties.
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**Gonorrhea 2009**  
**Cases/100,000 Population**

0 - 19
20 - 100
101 - 200
201 - 500
More than 500



<http://ideha.dhmmh.maryland.gov/cstip/>

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## WELCOME

The term Sexually Transmitted Infections (STIs) refers to any infections that can be spread through sexual contact and are also often referred to as sexually transmitted diseases (STDs). These terms, STI and STD, can be used interchangeably.

The Center for STI Prevention focuses on three STIs that are reportable in Maryland: **chlamydia**, **gonorrhea**, and **syphilis**. HIV/AIDS and Hepatitis B are also reportable infections, and are also sexually transmitted. [Click here](#) for more information about HIV/AIDS and [here](#) for more information about Hepatitis.

For information on the signs and symptoms of other common STIs such as human papillomavirus (HPV), herpes simplex virus, and trichomoniasis [click here](#).

## HOT TOPICS

2011 STI Update - May 26th

- [Flier](#)
- [Agenda](#)

[Locate an HIV or STD Testing Site](#)

National HIV & STD Testing Resources

Enter a Zip Code:

Select a Search Radius:

10 miles

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Control and Prevention (CDC)





# **Local Health Department STI Performance and Capacity**



# CT Allocation: Year 2

	Feb-Dec 2009 IPP			<i>Jan-Dec 2010 IPP</i>		
	# CT Tests	% Pos.	% of Total	# CT Tests	% Pos.	% of Total
Females age ≤25	14,847	8.4%	73%	14,039	9.3%	62%
Females age 26+	3,795	3.2%	19%	4,857	3.5%	21%
Males	1,759	13.7%	9%	3,787	14.5%	17%
Total Volume	20,401	7.9%	100%	22,683	8.9%	100%



# STD Clinic Activity Summary

## 2008-2010

(Excludes Baltimore City)

	2008	2009	2010
Clinic visits	19,529*	27,451 **	26,089 $\pm$
Turn-aways	n/a	12,060	11,901

\*Five counties did not provide year 2008 data

\*\*Three counties provided only partial year 2009 data

$\pm$  Four counties provided only partial year 2010 data

NOTE: Data excludes Baltimore City STD clinics



# National Developments



# National Developments: HIV

- **National HIV/AIDS Strategy (NHAS, 7/2010) sets goals for 2015**
  - Reduce the annual number of new HIV infections by 25%
  - Reduce transmission rate by 30%
  - Increase from 79 to 90% the proportion of people living with HIV aware of their status
- Increasing access to care and improving health outcomes for plwhiv
- Reducing disparities related to HIV



# **New HIV Funds Impact STI: ETG, ECHPP, EHA**

- Shift in focus - includes reduction of transmission, emphasis on “Prevention with Positives”
- Includes:
  - Increased partner services support
  - New data system, PRISM
  - Support for linkage to care
  - Behavioral interventions for individuals with “high risk of transmission”
  - Routine STI screening as part of routine HIV care



# **National Hepatitis Strategy 5/2011**

- Educating Providers, Communities
- Improving Testing, Care, Treatment
- Strengthening Surveillance
- Eliminating Transmission of Vaccine-Preventable Viral Hepatitis;
- Reducing Viral Hepatitis Caused by Drug-Use Behaviors; and
- Protecting Patients and Workers from Health-Care Associated Viral Hepatitis



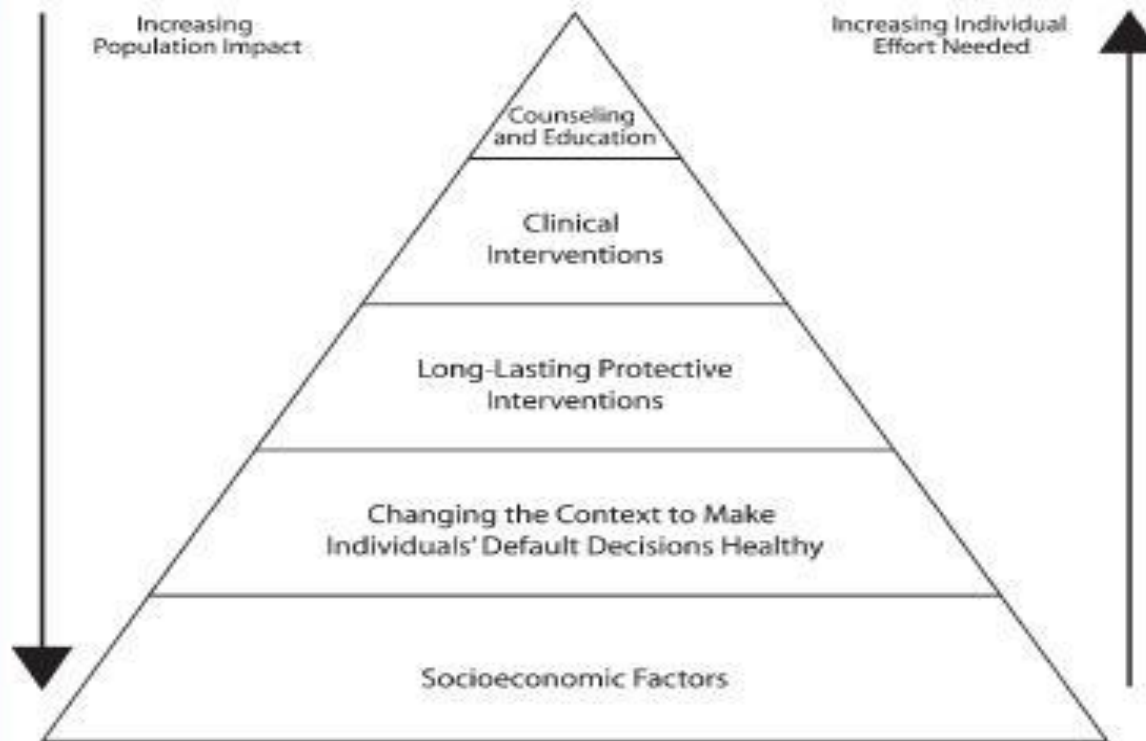
# National Developments Impacting STI Prevention

- **Health Reform**
  - Insurance coverage expansion
  - HIE Health Information Exchange
  - Community Health Center expansion, standards
- **“Prevention Through Health Care”  
PTHC**
- **Role of Public Health**
  - “Assess, Assure”
  - “Safety Net”





# Health Impact Pyramid



**FIGURE 1—The health impact pyramid.**



# Local Health Department STI Capacity

## “Safety Net”

- Combined with FP 6
- Opened new branch 1
- Contracted out clinic 3
- Seeking Community Health Center status 1
- Partner Services
  - Sustained, expanded

## “Assess, Assure”

- Surveillance systems
  - Reporting - sustained
- Coordination with CHCs
- Coordination with local providers, insurers:
  - Screening , treatment recommendations
- Public Awareness, community involvement



# National Scene Things to Watch

- Congressional and CDC budget 2012
- Health Equity
- Sexual Health
- National Coalition of STD Directors (NCSD) [www.ncsddc.org](http://www.ncsddc.org)
- [www.naccho.org](http://www.naccho.org)
- [www.astho.org](http://www.astho.org)



# Next Steps in Maryland



# Next Steps in Maryland: Data Sharing and Access

- CDC “ Data Security and Confidentiality Guidance for HIV, STI, Hepatitis and TB” expected in 2011
- **Goal – improved use of surveillance data for public health purposes**
- State and local health dept level plans



# **Next Steps in Maryland: Surveillance System Revisions**

- **Distribution of lab results via Document Imaging (LexMark scanning system)**
- **Electronic Laboratory Reporting CRISP/HIE**
- **Replacement of STD\*MIS - PRISM**



# Next Steps in Maryland: Expedited Partner Therapy?

- Exploring EPT for Maryland
- Stakeholder Input
  - Boards of Medicine, Pharmacy, Nursing
  - Medicaid, Insurers, Pharmacy associations
  - Local Health Dept, Health Care Provider organizations



# **Next Steps in Maryland: Increasing Effectiveness**

- **NAATs Allocation for CT/GC**
- **GC response planning with high morbidity counties**
- **MSM outreach**
- **PS – IPS, new DIS/FLS, regional**
- **Private sector provider awareness and education**
- **Expanded coordination at state, local and patient level:** STI, FP, HIV, Hepatitis, mental health



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